



Summary Note: GFF Webinar: Resource Mapping and Expenditure Tracking 29 January 2020

This online GFF seminar expounded on the process of Resource Mapping and Expenditure Tracking (RMET) and provided country examples of how the results could be used in development and monitoring of the Investment case, and more broadly the health sector. The webinar was facilitated by Petra Vergeer (Senior Health Specialist) and a presentation by Vibuthi Haté (Economist).

Broad sections of the Presentation: What is Resource Mapping and Expenditure Tracking?

- Resource mapping (RM) focuses on budget data while expenditure tracking focuses on capturing health spending.
- RM is usually annual while expenditure tracking is ongoing with exceptions of National Health Accounts (NHA) & Public Expenditure Reviews (PER)
- Both include domestic and external financing sources and can go beyond the Investment case

Why do we need to conduct Resource Mapping and Expenditure tracking?

- Resource mapping provides us answers to key questions, such as how is the health sector financed?; how much do is needed to finance the Investment Case (IC)?;, and how much has been allocated to specific programs and activities in budgets both domestic and external?
- Additionally, resource mapping provides much needed transparency in terms of how the IC will be funded (external and/or domestic)?; if there is a financing gap between costs and available resources, how large is it?; and are budget allocations equitable? Such information is also central to ensuring that prioritization considers a realistic resource envelope.
- Expenditure tracking supports alignment to national priorities and provides insight into where and how health spending is taking place.
- Lastly, expenditure tracking informs government on progress in implementation, which further strengthens overall planning and budgeting within MOH.

Timeline for conducting Resource Mapping and Expenditure Tracking

- Usually the preparation phase takes around 1-2 months. This involves getting agreement on TORs, hiring consultants or firms to conduct data collection, and completing a roadmap for next steps, including timeline for deliverables, specific deliverables, process for data collection and validation.
- Government also decides if resource mapping and expenditure tracking will be done at the same time or in phases. Typically, in countries where resource mapping and expenditure tracking is being conducted for the first time, it is recommended to start with resource mapping
- The data collection phase takes approximately 2 6 months. This part of the process involves getting information from government as well as development partners. Depending on willingness of stakeholders to provide data in a timely manner, this step can require constant follow up (especially with external partners). As such, this part can vary substantially in terms of total length of time taken to complete resource mapping.





Data Analysis and report writing generally takes 2-3 months: This involves submitting a draft report to MoH, which is then shared by the government with relevant stakeholders within and outside government. Please note, multiple iterations of the report and validation meetings are required at this stage to ensure that the analysis is accepted by all partners.

Questions and Answers

- The Zambia team expressed interest in understanding how Malawi addressed the issues around the scope of RM exercise such as limitations in granularity, in particular: what information was needed that the RM could not answer at the time? & Were there any questions that the RM couldn't answer for the IC?
 - 1. Limitation arose during the gap analysis mainly due to differences in cost categories: the RM data was too broad and could easily fall under various cost categories. This meant it was harder to map. In the upcoming rounds, the team is now planning to have better categories that are mutually exclusive: this includes geographical distribution of resources.
 - 2. The IC did an activity costing of needs in the districts, but the RM didn't collect that kind of information, this discrepancy is informing how Malawi structures the next round of RM
- Concerns about over subscription were also shared: Zambia and Ghana inquired about how to deal
 with "a positive funding gap"? Do you go back to the IC and add activities? If the IC is the subset, then
 how do you add other area,
 - 1. In response to concerns about a positive gap: though rare, examples of countries where it has happened were shared. Liberia's experience post Ebola was used as an example to show that in situations like outbreaks, it is possible to have over subscription to some categories of activities. This was more likely to show as these emergencies end. It calls for reexamining the reason and starting discussions around reallocation.
- How to deal with reducing the resource gap: This question arose out of the Senegal experience and called for further prioritization as well as examining the costing parameters
 - 1. It also matters how old the data being used is: If its too old, it may not be a true reflection of funding available. This also goes to address the issue raised by the team in Mauritania; the closer the data is to current dates, the better insights it will offer.
- Closely related was the issue of dealing with special circumstances such as emergency situations
 - 1. The presenter shared the Somalia example: the MOH is trying to see which components are currently being tracked as humanitarian but the funds are going to routine HSS. The tool has been adjusted to ensure that this clarity is collected with a plan to start discussions around transitioning these activities to routine service delivery. A similar approach was also being used for Afghanistan
 - 2. Countries experiencing emergency situations were advised to put emphasis on activity mapping because it focused on what is being implemented without the complexity of transactional costs of the implementation





- Relationship between NHA & RM: can they be complimentary? The complementarity of the approaches was discussed in two ways
 - 1. NHA provides information which can't be produced from the RM such as out of pocket expenditure and private sector financing; this information isn't possible from RM, so they do strengthen each other
 - 2. Furthermore, if the govt isn't ready for the NHA, then starting with the RM helps get the process off the ground and the information being prepared in a way that feeds into the NHA

Concerning participation, a question was asked about including parastatals, how to increase response from various partners and what role CSOs could play:

- The involvement of Parastatals would really depend on what the country has agreed upon and what they aim at knowing.
- For CSOs and private sector, CSOs can use that information for advocacy such as ensuring reallocation where it is needed. CSOs could also help in advocacy if the information is packaged in a way that they can use. They can also help in ensuring coverage
- As a way of increasing response, constant sharing of reports as they are being produced has been found to be helpful. And at times, if response is low, the secretariat can help reach out to the HQs of the various partners at the global level.
- On the private sector, involvement is minimal, but it can be included if the government requires it and can collect it. It also matters where the biggest source of funding comes from: that is where the biggest impact will come from

As the webinar wrapped up, the presenter discussed possible assistance available from the GFF Secretariat: In terms of TA, the secretariat provides TA in various combinations. It is usually agreed upon between the government and secretariat focal person.